

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is  
submitted between December 1 and January 31.

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

511  
Lobbyist's Registration Number

## FOR OFFICE USE ONLY

Postmark Date: 12/11/97

REG

1981370

12/21/97  
10:00  
\$10.00

1. NAME Young Christopher Gerard  
Last First MI  
2. BUSINESS PHONE (504) 828-6900  
Area Code and Phone Number  
3. BUSINESS ADDRESS 701 Metairie Rd., Ste. 2A-210, Metairie, LA 70005  
Street and No. City State Zip  
4. EMPLOYER Self

5. EMPLOYER'S ADDRESS (Same as #3 above)  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name ☒ David Briggs Enterprises, Inc.  
Address 701 Metairie Road, Metairie, LA 70005  
Business or purpose Retail Beverage Alcohol and Restaurant  
Does this person pay you? Yes  
If No, who pays you? N/A

2. Name ☒ Louisiana Association of Alcoholic Beverage Licensees, Inc.  
Address P.O. Box 55012, Metairie, LA 70005  
Business or purpose Trade Association  
Does this person pay you? NO  
If No, who pays you? See #1 above

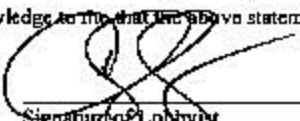
# LOBBYING REGISTRATION FORM



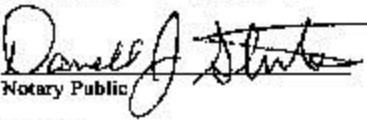
3. Name Louisiana Association of Nurse Anesthetists, L.L.C.  
Address P.O. Box 55261, Metairie, LA 70055  
Business or purpose Professional Association  
Does this person pay you? Yes  
If No, who pays you? N/A
4. Name (Left Blank)  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name (Left Blank)  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of Louisiana  
Parish of Jefferson

Before me, the undersigned authority, personally came and appeared Christopher C. Young, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

  
Signature of Lobbyist

Sworn to and subscribed before me on this 1st day of December, 1997.

  
Notary Public

Rev. 8/97

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY

